

mutation. All mutation carriers reported binge eating, as compared with 14.2 percent of the subjects without mutations ($P=0.04$) and 0 percent of the normal-weight subjects without mutations. The frequency of binge eating was similar among carriers of mutations in the putative coding domain of LEPR and among carriers of mutations in the region of POMC encoding (alpha) melanocyte-stimulating hormone.

Conclusions: Binge eating is a major phenotypic characteristic of subjects with a mutation in MC4R, a candidate gene for the control of eating behavior. [References: 43]

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Authors

Franklin C. Dimmeler S. Hamm CW. van den Brand MJ. Boersma E. Zeiher AM. Dimmocks ML. CAPTURE Study Investigators.

Title

Soluble CD40 ligand in acute coronary syndromes

Source

New England Journal of Medicine. 343(10):1104-1111, 2000 Mar 20.

Abstract

Background: CD40 ligand is expressed on platelets and released from them on activation. We investigated the predictive value of soluble CD40 ligand as a marker for clinical outcome and the therapeutic effect of glycoprotein IIb/IIIa receptor inhibition in patients with acute coronary syndromes.

Methods: Serum levels of soluble CD40 ligand were measured in 1988 patients with acute coronary syndromes who had previously been enrolled in a randomized trial comparing clopidogrel with placebo before coronary angioplasty and in patients with acute chest pain.

Results: The levels of soluble CD40 ligand were elevated (above 5.0 mug per liter) in 44 patients with acute coronary syndromes (44.8 percent). Among patients leaving the placebo, elevated soluble CD40 ligand levels indicated a significantly increased risk of death or nonfatal myocardial infarction during the course of follow-up (adjusted hazard ratio, 2.71 compared with patients with low levels of the ligand [below and/or equal to 5.0 mug per liter], 1.71; 95 percent confidence interval, 1.22 to 5.35; $P=0.001$). The prognostic value of this marker was validated in the patients with chest pain, among whom elevated soluble CD40 ligand levels identified those with acute coronary syndromes who were at high risk for death or nonfatal myocardial infarction (adjusted hazard ratio, 3.18 compared with those with low levels of the ligand, 1.87; 95 percent confidence interval, 1.18 to 5.35; $P<0.001$). The increased risk in patients with elevated soluble CD40 ligand levels was significantly reduced by treatment with abciximab (adjusted hazard ratio, 0.37 compared with those receiving placebo, 0.37; 95 percent confidence interval, 0.20 to 0.83; $P<0.001$), whereas there was no significant treatment effect of abciximab in patients with low levels of soluble CD40 ligand.

Conclusions: In patients with unstable coronary artery disease, elevation of soluble CD40 ligand levels indicated an increased risk of cardiovascular events. Elevation of soluble CD40 ligand identifies a subgroup of patients at high risk who are likely to benefit from antiplatelet treatment with abciximab. [References: 39]

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